



Attorney's Docket No.: 51040.P029

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application for:

David R. Ohm

Application No.: 10/087,878

Filed: March 1, 2002

For: MONITORING A
SEMICONDUCTOR LASER
UTILIZING AN INCORPORATED
BEAM SPLITTER DEVICE

Examiner: Not Yet Assigned

Art Group: 2633

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed Commissioner for Patents, Washington, DC 20231 on:

Date of Deposit: April 18, 2002

Name of Person Mailing: Heather L. Adamsong

Signature: *Heather L. Adamsong* Date: 04/18/2002

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Washington, DC 20231

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REQUEST FOR CORRECTED FILING RECEIPT

Dear Sir:

Enclosed is a copy of the official Filing Receipt for the above-referenced patent application with an error noted thereon in red. A clerical error was made on the Utility Patent Application Transmittal incorrectly stating the Attorney Docket No. as "31008.P029." Therefore, it is respectfully requested that the Attorney Docket No. be corrected to read **51040.P029** and a new Filing Receipt be issued accordingly.

The Commissioner is hereby authorized to charge shortages or credit overpayments to Deposit Account No. 501569. A Fee Transmittal is enclosed in duplicate for fee processing purposes.

Respectfully submitted,
COLUMBIA IP LAW GROUP, PC

Dated: *April 18*, 2002

[Signature]
Robert H. Chang
Registration No. 48,765

10260 SW Greenburg Road, Suite 820
Portland, Oregon 97223
Telephone: 503-595-2800

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Patent

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/087,878	03/01/2002	2633	487	<u>31008.P029</u> <u>51040.P029</u>	4	33	3

000025943
COLUMBIA IP LAW GROUP, PC
10260 SW GREENBURG ROAD
SUITE 820
PORTLAND, OR 97223

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CONFIRMATION NO. 6254
FILING RECEIPT



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Date Mailed: 04/04/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

David R. Ohm, Tigard, OR;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 04/03/2002

Projected Publication Date: 09/04/2003

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Monitoring a semiconductor laser utilizing an incorporated beam splitter device

Preliminary Class

359

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/087,878	
	Filing Date	March 1, 2002	
	First Named Inventor	David R. Ohm	
	Group Art Unit	2633	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	5	Attorney Docket Number	51040.P029

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	2. Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert H. Chang, Reg. No. 48,765 COLUMBIA IP LAW GROUP, PC
Signature	
Date	April 18, 2002

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FEE TRANSMITTAL for FY 2002		Compleat if Known	
Patent fees are subject to annual revision.		Application Number	10/087,878
		Filing Date	March 1, 2002
		First Named Inventor	David R. Ohm
		Examiner Name	Not Yet Assigned
		Group Art Unit	2633
		Attorney Docket No.	51040.P029
TOTAL AMOUNT OF PAYMENT (\$)		0.00	

METHOD OF PAYMENT		FEE CALCULATION (continued)																																											
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 501569 Deposit Account Name: Columbia IP Law Group, PC <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																																											
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																													
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**or number previously paid, if greater; For Reissues, see above																																													
		Other fee (specify)																																											
		SUBTOTAL (3) (\$) 0.00																																											

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Robert H. Chang	Registration No. (Attorney/Agent)	48,765	Telephone	503-595-2800
Signature				Date	April 18, 2002

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